PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10 74g 87A

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			26					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	26 minus 20=		•	<u>&</u>		XS 9=		OR	X\$18=	108
IND	EPENDENT CL	AIMS	3 mi	nus 3 =	•			X43=		OR	X86=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT	ESENT		· 🗅	•	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					r -0 ° in c	olumn 2		TOTAL		OR	TOTAL	878
	CLAIMS AS AMENDED - PART III Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR	OTHER SMALL	•
AMENDMENT A		CLAIMS REMAINING .AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 25	Minus	- 8	16	=		XS 9=		OR	XS18=	
	Independent	. 2	Minus	***	3	=		X43=		OR	X86=	
٩.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	-	OR	+290=	
	TOTAL										TOTAL	
(Column 1) (Column 2) (Column 3)											ADDIT. FEE	L
		(Column 1) CLAIMS	T	HIGH		Coluitin s	۱٠,	. 1	ADDI-			ADDI-
AMENDMENT B	,	REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	·	RATE	TIONAL FEE
	Total	•	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***	•	<u> </u>	╛	X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-145=		OR	+290=	
								TOTAL	·.		TOTAL	•
AED TEE OR ADDIT FEE												
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT. EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus			=		X8 9=		OR	X\$18=	.[
	Independent	•	Minus	***		٥		X43=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3										OR	+29,0=	ļ
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3 **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3." **OPTION OF TOTAL ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "3."												
	The "Highest Num	nber Previously Pai	d For` (Total o	r Independ	leni) is the	highest numb	oer lo:	und in the app	ropriate bo	c in co	lumn I	